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DRUG FACTS

⌋ Campbell Union High School District

ACKNOWLEDGMENTS

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San Diego City Schools Curriculum Services Division, from whom the idea of this booklet and the majority of the information was obtained.

Drug Abuse, compiled by Angela Kitzinger and Patricia Hill.

Comparison Chart of Major Substances Used for Mind-Alteration, by Joel Fort, M.D., Director for Special Problems, San Francisco Health Department.

Los Angeles County Sheriff's Department.

Stan Hardman, Lt., Narcotics Detail, San Jose Police Department.

California State Board of Pharmacy, San Francisco, California.

San Jose Mercury and News, San Jose, California.

*Delinquency Drugs
Crimes Drug peddling*

INTRODUCTION

The purpose of this booklet on drug abuse is to provide the most current, accurate information available on the subject. All of the material contained in this booklet has been reviewed by reliable sources and has been attested to for its validity. The purpose of this booklet is not to scare the reader — we strive only to present the facts. In each instance, we present the drug and — if it is not abused — its potential to mankind. We also realize that some of the drugs listed have a potential for complete destruction of an individual, and the types of harm that accompany abuse of a drug are also given.

We have presented a short description and means of identification of the drugs, and then followed this with physical and psychological effects of the drugs. Included will be both the effects of abuse and the legitimate medical uses of the drugs.

Also included in this booklet is the usual single adult dose, the duration of action, the potential for tolerance, the potential for physical dependence, the overall potential for abuse, and the potential for psychological dependence.

No effort has been made to include all the powders, pills, capsules, liquids, plants, or other assorted substances with which experimentation is taking place.

This booklet is concise and is not intended for philosophizing or for making moral judgments. We do feel, however, that there will be many temptations for experimentation with drugs by young people, and we therefore believe that the following information could help an individual meet situations in which the wrong choice could lead to self-destruction.

DEFINITIONS

DRUG ABUSE — The illegal self-administration of a wide range of substances, medicinal and nonmedicinal. A misuse of drugs.

DEPENDENCE — The tendency to develop a physiological or psychological need to continue to use drugs.

LEGITIMATE MEDICAL USE — Used only under advice of a doctor, with the doctor controlling the amount and time interval of dosage.

DRUG EFFECTS — Describes both the physiological and psychological effects a drug can have on an individual.

SOCIAL FACTORS — How a drug may affect a person in his personal, family, and community life.

POTENTIAL FOR TOLERANCE — The tendency for an individual to require additional amounts of a given drug, after the initial dosage, to produce the same physiological and psychological effects.

PHYSIOLOGICAL AND PSYCHOLOGICAL DEPENDENCY

The term "drug dependence" is gradually replacing the terms "addiction" and "habituation" in drug abuse literature. This development is most important since the use of the two terms has resulted in the erroneous impression that addiction, with its physical components which are sensationally evident in withdrawal illness, is the most serious manifestation of drug dependence and that habituation is of lesser importance because it functions merely on the psychological level. This impression is dangerous; it leads to the false conclusion that marijuana is "not dangerous" because it is "not addicting." It is now recognized that psychological dependence, formerly called "habituation", is more complex and compelling than physical dependence, formerly called "addiction." It is known that physical dependence may be overcome, with suitable medical treatment, in a matter of 72 hours, whereas no means has yet been found to overcome psychological dependence on a drug.*

*Angela Kitzinger and Pat J. Hill, **DRUG ABUSE**, California State Source Book, 1967.

STIMULANTS

Amphetamines — "Pep Pills"

Amphetamine is a central nervous system stimulant, best known for its ability to combat fatigue and sleepiness. It also is sometimes used to curb the appetite and has thus played a role in weight reduction. Applied externally to nasal membranes, amphetamine exerts a constricting effect on the blood vessels and was, until abused, a standard ingredient of various commercial nasal sprays and inhalents. Such sprays are no longer available except on prescription.

Identification of Amphetamines

Amphetamines are known to drug abusers as pep pills, wake-ups, eye-openers, co-pilots, truck drivers, or bennies. As with other dangerous drugs, the slang names applied to them by abusers are frequently derived from the shapes and colors of capsules and tablets, their effects, or their use.

Examples:

Benzedrine (Bennies), Methedrine (Crystal), Dexedrine (Dexies, Xmas Trees), and Cocaine (Coke, Snow).

ABUSE:

Because the body develops a tolerance to amphetamines, abusers increase their dosages gradually, a factor which exaggerates the normal effects of these drugs and results in:

- Euphoria
- Alertness
- Reduction of awareness of fatigue
- Excitability
- Tremor of the Hands
- Talkativeness
- Restlessness
- Enlarged Pupils
- Sleeplessness
- Heavy Perspiration
- Loss of Appetite
- Weight Loss

Continued abuse of amphetamines can cause:

- High Blood Pressure
- Abnormal Heart Rhythms
- Heart Attacks
- Suicidal Attempts

In serious cases, there is a drug psychosis resembling schizophrenia, delusions and hallucinations, both auditory and visual. An added danger occurs when amphetamines are taken by long distance drivers to ward off sleep, for they are unaware of their fatigue until it overcomes them and possibly causes a serious accident on the highway.

Dependence

The use of amphetamines may develop a psychological dependence.

Amphetamines also may cause unacceptable sensitivity to other medication so that indicated treatment of the amphetamine user may be unsafe.

Usage Single Adult Dose — 2.5 - 5.0 Mg.

Duration of Action: — Four (4) hours

Legitimate Medical Use — Treatment of obesity, fatigue, or depression, anesthesia of the eye and throat.

Drug Effects and Social Factors

1. Does the drug have a potential for tolerance? — Yes
2. Does the drug have a potential for physical dependence? — Yes
3. What is the overall potential for abuse? — High
4. What is the potential for psychological dependence? — High.

AMPHETAMINES are stimulants. When improperly used they tend to create reckless behavior. May be a cause in connection with accidents, wild parties, assaults, delinquency, and burglary.



Typical Amphetamine Drugs* ("bennies"). Also known as pep pills, co-pilots, footballs, etc.

*Both barbituates and amphetamines come in a wide variety of sizes, shapes, and colors. These are only a few typical examples. In any case, positive identification should be made by chemical test.

DEPRESSANTS

Barbiturates — Sedatives, Sleeping Pills

The barbiturates are a large family of drugs derived from barbituric acid, which was developed in Germany in the 19th Century. Since then, innumerable barbiturates have been synthesized and prepared for medical use under trade names such as Seconal, Phenobarbital, and Nembutal. These drugs are available in liquids, tablets, capsules, and various other forms.

Identification of Barbiturates

Barbiturates are known to drug abusers as barbs, candy, goof-balls, sleeping pills, or peanuts. Specific types are often named after their color or shape. For example, solid yellow capsules are known to abusers as yellows, yellow jackets, or nimbies. Red capsules are called reds, pinks, red birds, red devils, seggy, and seccy. Red and blue capsules are known as rainbows, red and blues, or double trouble. Solid blue capsules are known by abusers as blues, blue birds, blue devils, or blue heavens.

Examples:

Seconal (Red Devils), Nembutal (Yellow Jackets), and Phenobarbital (Phennies).

Abuse

Continued and excessive dosages of barbiturates result in:

- Euphoria
- Impaired judgment
- Reaction time is retarded
- Slurring speech
- Staggering
- Loss of balance and falling
- Quick temper
- A quarrelsome disposition
- Coma (with danger of pneumonia and death)
- Sleep induction

Overdoses, particularly when taken in conjunction with alcohol, may result in unconsciousness and death, unless proper medical treatment is given.

Statistics on deaths show that more people die as a result of barbiturate poisoning than from any other kind of poison.

Dependence

The use of barbiturates may develop a physical dependence. Such dependence does not usually develop from dosages normally used in medical practice.

Withdrawal symptoms usually are far more dangerous than those resulting from narcotics withdrawal and include:

First day: nervousness, headaches, anxiety, nose twitching, tremor, weakness, insomnia, nausea, changes in blood pressure, and increasing discomfort as the day progresses

Second and third days: convulsions — dangerous and possibly fatal.

Later: mental confusion, delirium, hallucinations, and exhaustion.

Usage Single Adult Dose: — 50 - 100 Mg.

Duration of Action: — Four (4) Hours

Legitimate Medical Use: — Treatment of insomnia and tension.

Drug Effects and Social Factors:

1. Does the drug have a potential for tolerance? — Yes
2. Does the drug have a potential for physical dependence? — Yes
3. What is the overall potential for abuse? — High
4. What is the potential for psychological dependence? — High.

BARBITURATES are sedatives. They affect people much like alcohol. Overconsumption may cause death. Suspect them as possible cause in connection with: delinquency, intoxication, coma, accidents, death.



Typical Barbiturate Drugs* Also known as "red birds," "goof balls," "yellow jackets," "blue heavens," etc.

GLUE-SNIFFING

Nature of Glue

Plastic glues vary in chemical composition, depending on the specific formula used by the manufacturer, but all of these cements contain highly volatile organic solvents — substances considered in industry to be safe when inhaled in low vapor concentration, but known to be dangerously toxic when inhaled in high concentration. Solvene is a prime constituent of most glues and of plastic cements.

The effects of glue sniffing are comparable, except in degree, to the effect of a general anesthetic upon the body. The glue sniffer experiences a tingling sensation in his head — a lightness and an exhilaration known to him as a “jag”. If he continues to inhale the glue, he will experience a state similar to alcoholic intoxication.

Identification of Dangerous Glue

Quick drying plastic cement, frequently called airplane glue, as well as certain solvents such as benzene, carbon tetrachloride, and ethyl alcohol, can be very harmful when breathed.

Abuse

Inhalation of such toxic fluids commonly result in:

- Euphoria
- Intoxication
- Dizziness
- Possible loss of consciousness
- Slurred speech
- Staggering
- Irritability
- Rash, foolish, and even dangerous actions

The “glue-sniffer” commonly:

- Has inflamed eyes
- Has irritated nose and lung tissue
- Loses appetite and weight
- Feels constantly sick

Habitual users may suffer serious:

- Liver damage
- Kidney damage
- Brain damage
- Destruction of bone marrow

Any of the above may eventually result in death.

Usual Single Adult Dose: Variable

Dependence

Glue-sniffing may develop a psychological dependence.

Duration of Action: Two (2) hours

Legitimate Medical Use: None

Drug Effects and Social Factors:

1. Does the drug have a potential for tolerance? — (Not Known)
2. Does the drug have a potential for physical dependency? — No
3. Does the drug have a potential for abuse? — Yes
4. Does the drug have a potential for psychological dependency?
Yes.

LSD-25

d-lysergic acid diethylamide tartrate
(a hallucinogenic drug)

Identification of LSD-25

LSD-25 is an odorless, tasteless, and colorless chemical which, when taken in even the smallest quantities, is likely to cause the mind to react in strange, unpredictable, and uncontrollable ways.

Abuse

Eating, inhaling, or injecting even as small a quantity of LSD as 1/280,000 of an ounce causes symptoms which may include:

- Hallucinations
- Distortion and intensification of color and sound perception
- Panic
- Personality changes
- Loss of sanity
- Impulses towards violence
- Impulses towards suicidal acts
- Psychosis

These effects are totally unpredictable and vary widely from person to person and from "trip to trip." They may last from eight to ten hours, and may recur at much later dates without the individual's taking the drug again. *See case history summaries.

Some competent researchers are reporting that they have reason to believe that LSD causes permanent brain damage. Other workers report that there is some indication that LSD may alter the chromosome structure and result in malformed or otherwise defective children. Neither of these charges has been substantiated as absolute fact. Both possible results are so very serious, however, that it would be unfair not to mention them.

There are also physical effects associated with the use of LSD. These include:

- Dilated pupils
- Increase in blood pressure, heart rate, and blood sugar
- Nausea
- Chills, flushes, and irregular breathing

- Trembling
- Sweating of the hands

Sleep becomes virtually impossible until at least eight hours after the LSD episode is over; pupils are so widely dilated that the user frequently protects himself against the light with dark glasses, even at night.

LSD users develop an unusual personality characteristic which is described as a "missionary complex." They feel that everyone, particularly their friends and loved ones, must use the drug; and users become highly persuasive and persistent in encouraging such use.

The use of LSD can have disastrous consequences and may necessitate extensive psychiatric treatment.

Because of the growing abuse of LSD, the only licensed manufacturer of the drug in the United States voluntarily ceased production in April, 1966. Therefore, drug abusers will be using LSD of untested purity and strength.

***Reason Why Drug is Sought by Users:**

1. Seeking for meaning and consciousness -- expanding (LSD explorers — seeking sensory awareness)
2. Rebellion
3. Curiosity created by widespread publicity
4. Peer pressure of individual
5. Hedonistic reasons. For "KICKS" or "HIGHS."
6. Religious purposes
7. Persons who take LSD accidentally
8. Persons who take the drug experimentally

Dependence

The use of LSD may develop a psychological dependence.

Usual Single Adult Dose: — 250 Mg.

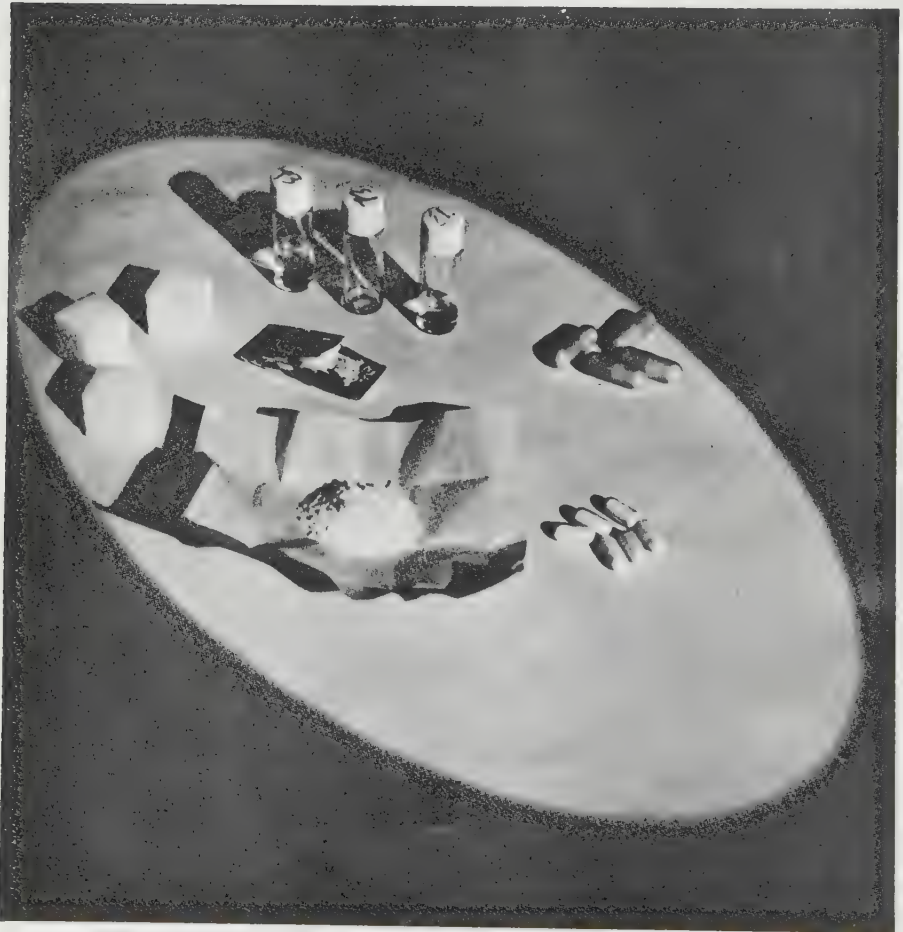
Duration of Action: — Eight (8) — Twelve (12) Hours

Legitimate Medical Use: — Experimental studies on treatment of alcoholism and mental illness

Drug Effects and Social Factors

1. Does the drug have a potential for tolerance? — Yes
2. Does the drug have a potential for physical dependency? — No
3. Does the drug have a potential for psychological dependency?
Yes
4. Does the drug have an overall potential for abuse? — High

*These statements were obtained from users and are not to be taken as factual.



LSD IS PICTURED HERE IN SOME OF THE MANY FORMS ENCOUNTERED BY LAW ENFORCEMENT OFFICERS. THE PREPARATION IS ODORLESS, COLORLESS AND TASTELESS.

MARIJUANA (MARIHUANA)

The term marijuana applies, in general, to the Indian hemp plant, or more specifically to the resinous substance present in the flowering tops of the unpollinated female **Cannabis Sativa**. This plant is an annual that grows from four to eight feet or higher, with five to seven long, slender, serrated leaves fanning outward from the central point like fingers in an outstretched hand.

Identification of Marijuana

Marijuana is usually in the form of a crushed mixture of leaves and flowering tops. It is usually rolled into a homemade cigarette and frequently contains "rough material" such as seeds and stems. Marijuana is commonly spoken of as pot, grass, tea, weed, stuff, reefers, or sticks.

Abuse

The physiological and psychological effects resulting from the use of marijuana as given in the 1965 Report on Drug Dependence of the World Health Organization are many.

Physiological effects include:

- Ataxia (inability to coordinate movements)
- Lowering amounts of glucose in blood
- Lowering of overall body temperature
- Increased appetite and desire for sweets
- Inflammation of mucous membranes
- Other variable effects

Some of the subjective effects of marijuana are:

- Hilarity
- Carelessness
- Distortion of sensation and perception
- Impairment of judgment and memory
- Irritability and confusion

Usual Single Adult Dose: Variable — 1 cigarette or 1 drink, or (cake — India)

Dependence

Marijuana may develop a psychological dependence. Because

so many users of narcotics report previous use of marijuana, concern should be given not only to the habit-forming use of marijuana, but also to the serious possibility that it will serve as a stepping stone to more serious drug addiction.

Duration of Action: Four (4) hours

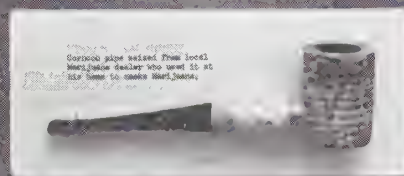
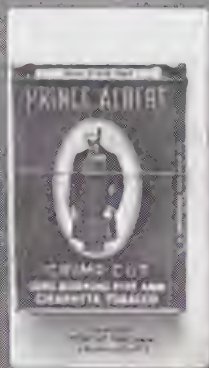
Legitimate Medical Use: None in the United States*

Drug Effects and Social Factors:

1. Does the drug have a potential for tolerance? — No
2. Does the drug have a potential for physical dependency? — No
3. Does the drug have a potential for psychological dependency?
Yes
4. Does the drug have an overall potential for abuse? — Yes

*Kitzinger & Hill, **Drug Abuse**, California State Source Book, 1967.

MARIJUANA & RELATED PARAPHERNALIA



DISPLAY BY DETECTIVE [illegible]
SAN JOSE POLICE DEPARTMENT

NARCOTICS

Opiates, Analgesics

Identification of Narcotics

Narcotics include a group of drugs that originally came from the opium poppy. These included morphine, codeine, heroin, and opium itself. More recently, chemists have produced synthetic narcotics including demoral and methadone.

Heroin, known to users as "H" or "horse", is by far the most widely used narcotic by drug users. Its production is prohibited in the United States, and it is not used in this country even for medicinal purposes. Heroin must be "cut" (diluted) for use. The user has no way of knowing how accurately this has been done. Since sale, possession, or use of heroin is illegal, this dilution must be done under uncontrolled conditions. Overdoses and death may result.

Abuse

Heroin has a particularly powerful depressant action on the respiratory center as well as on the spinal cord. Heroin produces the same general reactions as other narcotics, including:

- Constipation
- Loss of appetite
- Temporary impotency or sterility
- A blunting of the senses
- Euphoria (a sense of well-being)
- Stupor
- Coma

Dependence

The use of narcotics develops both physical and psychological dependence.

Tolerance to heroin builds up very rapidly with increasing amounts being constantly required by the user. For this reason, chances of addiction are great, and users are "hooked" before they realize it.

Suffering during withdrawal from the use of the drug is severe, and few permanent cures are recorded.

The costs of supporting the body's increasing demands for

heroin frequently force the abuser into some sort of crime to pay for the habit.

***Reasons Why Drug is Sought by Users:**

1. To get high (euphoria)
2. As an escape
3. To avoid withdrawal symptoms — to fee “habit”
4. To conform to various sub-cultures which sanction use
5. As a form of rebellion

Usual Single Adult Dose:

Heroin — 5-10%
Morphine — 15 Mg.
Codeine — 30 Mg.
Demerol — 1 Tablet

Duration of Action: Four (4) hours

Legitimate Medical Use: Treatment of severe pain, diarrhea, and cough in very limited dosages. Heroin not used at all.

Drug Effects and Social Factors:

1. Does the drug have a potential for tolerance? — Yes
2. Does the drug have a potential for physical dependency? — Yes
3. Does the drug have a potential for psychological dependency?
Yes
4. Does the drug have an overall potential for abuse? — High

*These statements were obtained from users and are not to be taken as factual.

THE IMPACT OF THE LAW

a n d

THE STUDENT'S FUTURE

Federal (1) and State (2) law both define narcotics and dangerous drugs, including marijuana and LSD, and provide penalties for a number of offenses in connection with them. Federal law deals mainly with producers and sellers. State law covers these offenses (3, 4) but also provides severe penalties for the sale of drugs to minor (5), for possession of narcotics (6) and dangerous drugs (7) by anyone, or even for possession of devices for injection of drugs (8).

Penalties include fines and jail sentences, placement in State hospitals (9) when necessary, and suspension and expulsion of students from school (10) for use, sale, or possession of narcotics.

Records show that the risk of being caught in narcotics offenses is very high. Everyone is a potential informer, and most arrests are on "tips" from a variety of people because of all sorts of personal reasons. Jealousy, dislike, competition, hope for an easier penalty for the guilty informer, or money rewards all cause others to inform on offenders.

Users often become peddlers to finance their own drug habit. A drug habit is so expensive that users cannot earn the required amount of money honestly. If they do not become dope peddlers, it is common for them to turn to theft, shoplifting, burglary, robbery, embezzlement, or prostitution which increases the chance of being caught and convicted.

Conviction on a drug offense has a serious lifelong effect. Those convicted can reasonably expect lifelong problems in getting jobs either with government agencies or with private industry. Besides trouble in finding work, the convicted narcotics offender often has strictly supervised probation that includes the requirement that he register as an addict wherever he goes. Other possible losses of being refused a passport, possible disqualification for a public office, legal inability to enter into contracts, and even the danger of losing the right to vote.

(1) Drug Abuse Control Amendments of Federal Food, Drug, and Cosmetic Act (1965)

- (2) Sec. 11001-11002 and 11901, California Health and Safety Code
- (3) Sec. 11500.5, California Health and Safety Code
- (4) Sec. 11911, California Health and Safety Code
- (5) Sec. 11913, California Health and Safety Code
- (6) Sec. 11500, California Health and Safety Code
- (7) Sec. 11910, California Health and Safety Code
- (8) Sec. 11915, California Health and Safety Code
- (9) Sec. 3000, California Welfare and Institutions Code
- (10) Sec. 10603, California Education Code

ILLEGAL TRAFFIC DANGEROUS DRUGS

Before any new drug can be offered commercially, it is reviewed by the Food and Drug Administration for safety and effectiveness. Some drugs, such as those used for the common cold, can be sold over the counter, but other more potent substances are required by law to be sold only on a physician's prescription.

Dangerous drugs get into the illegal retail trade through theft from reputable manufacturers, wholesalers, or pharmacies. Substantial quantities are produced by underground manufacturers who, under the cloak of legality, make large quantities of dangerous drugs illegally and dispose of them through the illicit trade.

An estimated ten billion capsules and tablets of dangerous drugs were produced and traded in the United States last year. It is believed that more than half of that quantity found its way into the hands of drug abusers through illegal channels.

STATEMENTS TO PONDER

Many youth will find themselves in situations where narcotics and other dangerous substances are available — even urged upon them. A decision to experiment is generally based on a lack of knowledge and a spur-of-the-moment impulse. The total implications of such a decision deserve a deliberate analysis of the hazard involved.

Read the following statements. Ponder them. Decide now how you will sidestep the problem if it comes your way.

Addition and Habituation

Considerable point has been made that some substances such as marijuana and LSD are not addicting and no physical withdrawal

problems are involved. It should be noted, however, that an emotional dependence upon these substances may develop that results in a compulsive habit. To label such complete dependence as psychological dependence rather than physical dependence is of little consolation to the user who develops a dependence he cannot break.

Physical and Psychological Damage

Each chemical taken into the body has its own effect, and the effects will be different from individual to individual. It is therefore hard to generalize on physical and psychological damage. It is fair to say, however, that permanent damage to organs of the body does occur, and prolonged, if not incurable, psychological disorders do result from the use of assorted narcotics and drugs. They do not solve problems. Personal problems become greater — not less.

Unknown Strength and Purity

Narcotics and dangerous drugs, when not bought by prescription, must come from the illegal market. No controls or standards can be applied to their strength or purity. The drug abuser has no way of knowing how much or exactly what he is taking. Death has been and can be the result.

Unpredictable and Uncontrollable Effects

Because each of us is different, unexpected and sometimes serious reactions occur even when taking prescribed medication under the direction of a physician. We each have different tolerances, susceptibilities, and even allergies to various substances. The chances of such reactions are increased by private experimentation with powerful drugs of unknown strengths. Results are unpredictable and may be uncontrollable and fatal even though a physician is called.

Loss of Purpose, Ambition, and Ability

The use of narcotics or dangerous drugs saps the individual of physical and emotional strength. Things that are important seem not to be. All purpose, except to get more drugs, is gone. The feeling that once one can do something much better (draw or play a musical instrument) when under the influence of the drug is only a personal feeling. Objective tests prove a loss of skill. A person's life may be permanently disrupted — even destroyed.

Extended Reactions

Peculiar to LSD is the possibility that the wild sensory reactions that occur as an immediate result of taking the drug may recur at a later time without warning and without further dosage. Medical men do not understand what the drug does to the system to allow these recurring reactions. The drug user may well fear that he is losing his mind, and, in fact, he sometimes may be.

Impaired Judgment

The use of narcotics and dangerous drugs affects the reporting system of our senses. Sizes, distances, colors, flavors, pain, etc., are all likely to be different. The same applies to our mental judgments of right, wrong, caution, prudence, etc. Most of our daily actions result from our physical and mental judgments. When these are impaired, our behavior is likely to be very unusual, even bizarre and dangerous.

Driving Hazard

Traffic accident investigators report that the drug user is an extreme hazard on the highway. The abuser has taken the drug to "feel different." Illusions, hallucinations, drowsiness, irritability, intoxication, impaired depth perception, or any of the other effects resulting from the use of drugs, obviously make the driver unable to cope with the normal complications of traffic.

Arrest

Purchase, possession, use, or sale of narcotics and dangerous drugs is illegal. The first-time experimenter or the habitual user is under constant threat of arrest by local, state, or federal authorities. Such arrests are reported nearly every day in the newspapers.

Cost

Experimentation with narcotics and dangerous drugs has often resulted in a dependence upon a substance that has literally taken every cent the user has. Some have been forced into criminal activities to pay for the physical or psychological dependence which they cannot break.

Cost is not restricted to the day-to-day support of physical or psychological dependence. Those who seek to break the habit and achieve rehabilitation invariably face extended periods of treatment that are very costly whether successful or not.

Requests for Help

Increasing numbers of troubled individuals are requesting psychiatric help. They are suffering from psychotic, neurotic, and assorted mental, physical, emotional, and character disorders. More and more of these cases are people who experimented with LSD after having been assured that it was harmless.

Cure

Psychiatrists, clinics, and mental hospitals report that the rate of permanent cure of drug abusers is extremely low. The only sure way to stop is not to start.

Conclusion

We have faith in our young people of today, and we strongly feel that when given the true facts they will make a decision that is honorable to themselves, to the community in which they live, and to the country in which they are citizens.

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